

Commonwealth of Massachusetts Division of Medical Assistance Provider Manual Series DAY HABILITATION PROGRAM MANUAL	SUBCHAPTER NUMBER AND TITLE 6 SERVICE CODES AND DESCRIPTIONS	PAGE 6-1
	TRANSMITTAL LETTER DHP-24	DATE 10/16/03

601 Explanation of Definitions

A day habilitation member is rated as a “low-need,” “moderate-need,” or “high-need” member based on his or her score on the Client Severity Profile Form.

(A) Low-Need Member — scores between one and 41.

(B) Moderate-Need Member — scores between 42 and 71.

(C) High-Need Member — scores 72 or higher.

602 Service Codes and Descriptions

Service

Code Modifier Service Description

Community-Based Services

Code H2014 (including use with all modifiers) is billable in 15-minute units. The minimum allowable unit(s) for day habilitation services is one unit. The maximum allowable unit(s) for day habilitation services is 24 units. Providers must report the actual time spent by the member in the day habilitation program. These minimum and maximum allowable units apply to day habilitation service codes only. See Service Code T2003 for minimum/maximum units allowed for in-facility transportation services.

H2014		Skills training and development, per 15 minutes (day habilitation, low need)
H2014	TF	Skills training and development, per 15 minutes, intermediate level of care (day habilitation, moderate need)
H2014	TG	Skills training and development, per 15 minutes, complex/high tech level of care (day habilitation, high need)
H2014	22	Skills training and development, per 15 minutes, unusual procedural services (supplemental staffing for members who reside in a nursing facility and attend a community-based day habilitation program)

In-Facility Services

H2014	U2	Skills training and development, per 15 minutes (Use modifier U2 to denote day habilitation in a nursing facility with a staff-to-participant ratio of 1:1.)
H2014	U1	Skills training and development, per 15 minutes (Use modifier U1 to denote day habilitation in a nursing facility with a staff-to-participant ratio of 1:2 or 1:3.)
T2003		Nonemergency transportation; encounter/trip (Staff transportation to nursing facility, bill per one-way trip up to a maximum of two trips. Use this in conjunction with H2014 TG and TF only when services occur in a nursing facility.)

This publication contains codes that are copyrighted by Ingenix, Inc. Certain terms used in the service descriptions for HCPCS codes are defined in the *Ingenix HCPCS Level II* code book.

Commonwealth of Massachusetts Division of Medical Assistance Provider Manual Series DAY HABILITATION PROGRAM MANUAL	SUBCHAPTER NUMBER AND TITLE 6 SERVICE CODES AND DESCRIPTIONS	PAGE 6-2
	TRANSMITTAL LETTER DHP-24	DATE 10/16/03

This page is reserved.